Launched in 2014, West Wakefield’s active signposting initiative – care navigation – is designed to connect patients more directly with the most appropriate source of help or advice. It aims to change the assumption that GPs are the first point of care for patients. West Wakefield Health and Wellbeing Ltd is responsible for around 65,000 patients across a federation of six busy GP surgeries. However, many of their GPs were finding they were often seeing patients with minor ailments, whose concerns were more relevant to another primary care service or third sector provider. This meant not only that GP hours were being used inefficiently, but that patients were waiting longer to get the care that was right for them.

“The conclusion reached at West Wakefield,” explains David Cowan, Care Navigation Programme Manager at West Wakefield Health and Wellbeing, was that “there were other professionals who could effectively take on some of the work that GPs do.” Care navigation was developed from an awareness that the skills and abilities of frontline staff could be further developed to support patients and GPs. Taking inspiration from a care navigation scheme in the US, the idea was formed that receptionists and other frontline staff could be provided with specialist knowledge about the alternative healthcare professionals and services in their area. With this, frontline staff would be equipped to safely and effectively highlight to patients, when requesting a GP appointment, the most appropriate service for their need. As a result, GP’s time could be released to do more of what only they can do, such as spending more time with people with longer term, more complex needs. Additionally, patients are offered a wider selection of relevant services and experience shorter waiting times. As David emphasises, “care navigation is fundamentally about empowering patient choice, not about triaging clinical decisions.”

Training staff – the two-step approach

With safely extending patient choice being central to care navigation, Kate Brentley, General Manager at West Wakefield explains that a “two-step approach” was necessary to designing and implementing the care navigator role and the accompanying accredited online training programme.

The first step, Kate explains, is that CCG areas need to assess whether their local area has the appropriate infrastructure to allow the care navigation model to be put in place. At West Wakefield, a working group of practice managers, receptionists, and third sector representatives from Nova Wakefield and Wakefield Public Health carefully designed an outline of a care navigator role and together developed a robust directory of local services that care navigators could access.

Kate advises that “the key is for the system to work collaboratively to fully understand what services would work for their local area, as well as provide a safe environment for staff to care navigate within.” Kate recommends it is vital for CCG areas to identify 1) the local services which are available; 2) what their access criteria is; 3) which services they wish to prioritise.
A cultural change for patients

A key challenge faced when implementing care navigation at West Wakefield has been ensuring patients feel confident and comfortable with the new procedures. Kate explains that embarking on this “cultural change” in how patients make appointments at their local GP practice has required a longer-term strategy, involving how practices communicate and promote the new approach.

Kate explains that practices in West Wakefield have used simple and easy ways to explain the new system to patients, using devices such as displaying printed posters, or running short videos/presentations in GP waiting rooms. Methods have also included getting GPs to record short telephone messages for patients to listen to when on hold, briefly explaining the care navigation process to them.

Kate remarks that it is evident which practices have been using care navigation the longest due to the patient response. She explains that longer-term experiences of care navigation have noticeably made many patients more self-aware. Patients are now often self-referring to another service when calling the surgery to make an appointment.

WAYS TO EXPLAIN THE CARE NAVIGATION SYSTEM TO PATIENTS

1. Display printed posters explaining the new system
2. Run short videos or PowerPoint presentations in the GP waiting room
3. Record short telephone messages for patients to listen to when on hold
“Hello my name is Dr ….. and I am the senior partner. You will shortly be put through to the reception staff. We have asked the receptionist to ask you if you wouldn’t mind telling them a little about the problem you are calling about today. This is simply so they can direct you to the person who would be most suitable to help you with your problem. Of course, you don’t have to do this, but it would help us to help you and other patients. Thank you very much.”

Example of a recorded telephone message

Impact

The quantitative impact of the care navigation programme since its inception across west Wakefield has delivered convincing results. Between 1st April and 31st October 2016, 13,684 interventions were made, saving a total of 1,685 GP appointments in this period.

Furthermore, data from an independent survey carried out 2017/18, covering 18 practices in the west Wakefield area, demonstrates that patients are becoming highly responsive to care navigation. The survey showed that 92 per cent of all signposts were accepted by patients. In addition, 97 per cent of these patients were happy with the healthcare professional they were signposted to.

The success of care navigation is fundamentally built on practices forming close working relationships with other primary care services and third sector providers – increasing the confidence of care navigators to signpost these services to patients.

“It is evident which practices have been using care navigation the longest due to the patient response. Longer-term experiences of care navigation have noticeably made many patients more self-aware. Patients are now often self-referring to another service when calling the surgery to make an appointment.”

Kate Brentley, General Manager